


**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

		Application Number	09/652,388
		Filing Date	August 31, 2000
		First Named Inventor	Hjartarson, Gudmundur
		Art Unit	2631
		Examiner Name	Chi H. Pham
Total Number of Pages in This Submission	26	Attorney Docket Number	020510-4.00US

ENCLOSURES (Check all that apply)				
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to Technology Center (TC)		
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences		
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)		
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information		
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter		
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):		
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Return Postcard		
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund			
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____			
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application				
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53				
<table border="1"> <tr> <td>Remarks</td> <td>The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.</td> </tr> </table>			Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.
Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.			

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Technology Center 2600

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Townsend and Townsend and Crew LLP Ardeshir Tahibi	Reg. No. 48,750
Signature		
Date	July 21, 2004	

CERTIFICATE OF TRANSMISSION/MAILING

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Typed or printed name	Diane Hawley		
Signature		Date	July 21, 2004



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10/10/06
S/ [Signature]
D

PATENT
Attorney Docket No.: 020510-000400US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

HJARTARSON et al.

Application No.: 09/652,388

Filed: August 31, 2000

For: ENHANCED LINE CARD AND
PACKETIZING CPE FOR LIFELINE
PACKET VOICE TELEPHONE

Customer No.: 20350

Confirmation No. 2861

Examiner: Chi H. Pham

Technology Center/Art Unit: 2631

AMENDMENT

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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed February 23, 2004, please enter the following amendments and remarks:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 18 of this paper.

07/27/2004 MBLANCO 00000043 201430 09652388

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